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PEACE OFFICER INVOLVED INJURIES OR DEATH REPORT

As required by Art. 2.139 of the Texas Code of Criminal Procedure, law enforcement agencies shall report all officer-involved injuries or deaths caused by the discharge of a firearm. Pursuant to the requirements of Art. 2.139, the following reporting form has been created for reporting such incidents.

"Officer-involved injury or death" means an incident during which a peace officer discharges a firearm causing injury or death to another." Art. 2.139 Code of Criminal Procedure.

Email completed form to: officershootingreport@texasattorneygeneral.gov

DATE OF REPORT 03/31/2	016				
AGENCY/FACILITY INFORMAT	ION				
Name of Agency/Facility Be	eaumont Police Department				
Address 255 College S					
_{City} Beaumont		∩ Zip Cod	_e 77701		
Telephone Number (409)	0				
Signature of Director of Agency/Facility (Required)					
Name of Person Filling Out Form Lieutenant Curtis Breaux					
Email of Person Filling Out Form cbreaux@beaumonttexas.gov					
1. WHAT WAS THE INJURED O	OR DECEASED'S GENDER?	8. WHAT WAS THE PEACE OFFICER'S GENDER?			
✓ Male		☑ Male ☐ Female			
2. WHAT WAS THE INJURED O	R DECEASED'S AGE AT TIME OF INCIDENT?	9. WHAT WAS THE PEACE OFFICER'S AGE AT THE TIME OF THE INCIDENT?			
22	☐ Not Available	26			
3. WHAT WAS THE INJURED OR DECEASED'S RACE/ETHNICITY? (Mark one based on information reported on state driver license application, state identification card application, or other government reported identification if available		10. WHAT WAS THE PEACE OFFICER'S RACE/ETHNICITY? (Mark only one)			
and known. If not available, mark no		American Indian	Black or African American		
☐ American Indian	🗖 Black or African American	or Alaska Native	☐ Hispanic or Latino		
or Alaska Native	☐ Hispanic or Latino	🗹 Anglo or White	☐ 0ther		
☑ Anglo or White	□ Other	Asian or Pacific Islande	r		
Asian or Pacific Islander	☐ Not Available	11. DURING THE INCIDENT,	PEACE DEFICER WAS:		
4. DATE OF INCIDENT	05 2046	☑ On Duty ☐ Off Duty			
Month 03 Day	Min 49 AM Ø PM	12. PEACE OFFICER WAS RI OR MORE OFFICERS:	ESPONDING TO CALL OR REQUEST WITH ONE		
5. LOCATION OF INCIDENT		☑Yes □ No			
Street address 655 S. 23	Brd	13 INCIDENT OCCUPRED D	SIDING OD AS A DESILIT OF A.		
City Beaumont		13. INCIDENT OCCURRED DURING OR AS A RESULT OF A:			
County Jefferson Zip 77707		☑ Emergency Call or Request for Assistance ☐ Traffic stop			
		•			
6. INCIDENT RESULTED IN:	☐ Injury	☐ Execution of a warrant			
7. INJURED OR DECEASED PE	RSON:	☐ Hostage, barricade, or other emergency situation ☐ Other — Specify type of call			
☑ Carried, exhibited or used		□ other — opecity type of (van		
Did not carry, exhibit or us	• •				